

402 West Washington Street, Room W246 Indianapolis, IN 46204-2739 http://www.in.gov/dhs/fire/fp_bs_comm_code/



INSTRUCTION: Please refer to the attached four (4) page instructions.

Attach additional pages as needed to complete this application.

Variance number (Assigned by department)

15-01-18(a) 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Name of the applicant Bryan Duncan, P.E. Director of Capital Planning Name of organization Telephone number (812) 237-8195 **Indiana State University** Address (number and street, city, state, and Zip code) 951 Sycamore Street Terre Haute, Indiana 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (if not submitted by the applicant) Name of person on behalf of the applicant Edwin L. Rensink Principal Name of organization Telephone number RTM Consultants, Inc. (317) 329-7700 Address (number and street, city, state, and Zip code) 6640 Parkdale Place, Suite J., Indianapolis, Indiana 46254 3. DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional License number William A. Browne, Jr., FAIA 4154 Name of organization Telephone number (317) 633-4040 Ratio Architects Address (number and street, city, state, and Zip code) 107 South Pennsylvania Street Indianapolis, Indiana 46204 4. PROJECT IDENTIFICATION Name of project State project number County **Indiana State University Blumberg Hall** Vigo County Site Address (number and street, city, state, and Zip code) 400 Mulberry Street Terre Haute, Indiana 47809 Addition Alteration Type of project: ☐ Change of Occupancy □ Existing New 5. REQUIRED ADDITIONAL INFORMATION The following required information has been included with this application (check as applicable): A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions) One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives. Written documentation showing that the local fire official has received a copy of the variance application. Written documentation showing that the local building official has received a copy of the variance application. 6. VIOLATION INFORMATION Has the Plan Review Section of the Division of Fire & Building Safety issued a Correction Order? Yes (if yes, attach a copy of the Correction Order) No Has a violation been issued? Yes (if yes, attach a copy of the Violation and answer the following) ■ No ☐ State Fire and Building Code Enforcement Section ☐ Local Fire Department

7. DESCRIPTION OF REQUESTED VARIANCE Name of code or standard and edition involved Specific code section General Administrative Rules, 2nd Edition Rule 4. Section 12(f) Nature of non-compliance (include a description of spaces, equipment, etc. involved as necessary) The project includes a small "bump-out" addition on each of floors 3-12 of approximately 50 sq ft per floor, as well as a small net increase in area on the 2nd floor "mezzanine" level. The building does not comply with the Type IA Construction requirements per current code. All building elements are a minimum of 1-hour rating, but do not comply with Table 601 requirements for Type IA Construction. The building is 12 stories in height (including the partial 2nd floor "mezzanine") and is constructed of a combination of precast and cast-in-place concrete construction. Blumberg Hall is one (1) of four (4) residence towers making up the 1960's-era Sycamore Towers at the Indiana State University campus in Terre Haute. The project proposes a renovation/rehabilitation to the structure, including student room and rest room renovations, common use area renovations, new mechanical and plumbing systems, electrical system upgrades, and improvements to the existing building envelope. 8. DEMONSTRATION THAT PUBLIC HEALTH, SAFETY, AND WELFARE WILL BE PROTECTED Select one of the following statements: Non-compliance with the rule will not be adverse to the public health, safety or welfare; or Applicant will undertake alternative actions in lieu of compliance with the rule to ensure that granting of the variance will not be adverse to public health, safety, or welfare. Explain why alternative actions would be adequate (be specific). Facts demonstrating that the above selected statement is true: The building will be protected throughout with a sprinkler system per NFPA 13 as part of this project. Additionally, an automatic standpipe system will be provided throughout the building. A voice-alarm system will be provided throughout the building as part of this project. Two (2) separate standby power generators will be provided; one for the fire pump, and one to serve elevators, emergency lighting, the fire alarm system, and the existing stair pressurization system. Based upon the fire and life safety improvements proposed, the small additional floor area will not be adverse to safety. An identical variance was granted for ISU Mills Hall, another wing of Sycamore Towers - 14-1-37(a). DEMONSTRATION OF UNDUE HARDSHIP OR HISTORICALLY SIGNIFICANT STRUCTURE Select one of the following statements: 🔲 Imposition of the rule would result in an undue hardship (unusual difficulty) because of physical limitations of the construction site or its utility services ■ Imposition of the rule would result in an undue hardship (unusual difficulty) because of major operational problems in the use of the building or structure ☐ Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements ☐ Imposition of the rule would prevent the preservation of An architecturally or a historically significant part of the building or structure. Facts demonstrating that the above selected statement is true: The additional area is needed on the mezzanine level to complete construction for new resident supervisor apartment units and reconfiguration of the space otherwise. The small bump-out addition will accommodate a new curtain wall feature to dress up the exterior of the building. 10. STATEMENT OF ACCURACY I hereby certify under penalty of perjury that the information contained in this application is accurate Signature of applicant or person submitting application Please print name Date of signature (month, day, year) Edwin L. Rensink Signature of design professional (if applicable) Please print name Date of signature (month, day, year) William A. Browne, Jr., FAIA 11. STATEMENT OF AWARENESS (If the application is submitted on the applicant's behalf, the applicant must sign the following statement) I hereby certify under penalty of perjury that I am aware of this request for variance and that this application is being submitted on my behalf. Signature of applicant Please print name Date of signature (month, day, year) Bryan Duncan, P.E.



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INSTRUCTION: Please refer to the attached four (4) page instructions. Variance number (Assigned by department) Attach additional pages as needed to complete this application. 15-01-1800 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Name of the applicant Bryan Duncan, P.E. **Director of Capital Planning** Name of organization Telephone number **Indiana State University** (812) 237-8195 Address (number and street, city, state, and Zip code) 951 Sycamore Street Terre Haute, Indiana 47809 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (if not submitted by the applicant) Name of person on behalf of the applicant Edwin L. Rensink **Principal** Name of organization Telephone number RTM Consultants, Inc. (317) 329-7700 Address (number and street, city, state, and Zip code) 6640 Parkdale Place, Suite J., Indianapolis, Indiana 46254 3. DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional License number William A. Browne, Jr., FAIA 4154 Name of organization Telephone number Ratio Architects (317) 633-4040 Address (number and street, city, state, and Zip code) 107 South Pennsylvania Street Indianapolis, Indiana 46204 4. PROJECT IDENTIFICATION Name of project State project number County **Indiana State University Blumberg Hall** Vigo County Site Address (number and street, city, state, and Zip code) 400 Mulberry Street Terre Haute, Indiana 47809 Addition Type of project: New Alteration ☐ Change of Occupancy ☐ Existing 5. REQUIRED ADDITIONAL INFORMATION The following required information has been included with this application (check as applicable): A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions) One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives. Written documentation showing that the local fire official has received a copy of the variance application. Written documentation showing that the local building official has received a copy of the variance application. 6. VIOLATION INFORMATION Has the Plan Review Section of the Division of Fire & Building Safety issued a Correction Order? ☐ Yes (if yes, attach a copy of the Correction Order) Has a violation been issued? Yes (if yes, attach a copy of the Violation and answer the following) ☐ State Fire and Building Code Enforcement Section ☐ Local Fire Department

7. DESCRIPTION OF REQUESTED VARIANCE			
Name of code or standard and edition involved		Specific code section	
2014 Indiana Building Code		403	
Nature of non-compliance (include a description of spaces,	equipment, etc. involved	as necessary)	
The project includes a small "bump-out" as a small net increase in area on the 2 nd requirements of the current code for hig additional floor area proposed for the buThe building is 12 stories in height (inclu of precast and cast-in-place concrete conthe 1960's-era Sycamore Towers at the I renovation/rehabilitation to the structur renovations, new mechanical and plumb building envelope.	floor "mezzaning herise buildings uilding. Inding the partial astruction. Blundiana State Under studing studi	ne" level. The building will is which requirement is techn 2 nd floor "mezzanine") and in the standard floor (1) of four (1) iversity campus in Terre Hallent room and rest room room	not fully comply with the ically triggered by the is constructed of a combination (4) residence towers making up ute. The project proposes a covations, common use and overtions.
8. DEMONSTRATION THAT PUBLIC HEALTH, SA	FETY, AND WELFA	RE WILL BE PROTECTED	
Select one of the following statements:			
■ Non-compliance with the rule will not be adverse Applicant will undertake alternative actions in to public health, safety, or welfare. Explain we Facts demonstrating that the above selected statement is true	n lieu of compliance	with the rule to ensure that granti-	ng of the variance will not be adverse
Additionally, an automatic standpipe 2. A voice-alarm system will be provide 3. Two (2) separate standby power generate emergency lighting, the fire alarm sy 4. Based upon the fire and life safety in safety. An identical variance was gra 9. DEMONSTRATION OF UNDUE HARDSHIP OR	ed throughout the partors will be partors will be partors and the example of the partors of the	ne building as part of this proprovided; one for the fire purkisting stair pressurization symposed, the small additional fills Hall, another wing of Symposed.	oject. np, and one to serve elevators, ystem.
Select one of the following statements:			
☐ Imposition of the rule would result in an undue hardsh ■ Imposition of the rule would result in an undue building or structure ☐ Imposition of the rule would result in an undue hard Imposition of the rule would prevent the preservation Facts demonstrating that the above selected statement is true The additional area is needed on the me	hardship (unusual dship (unusual difficu on of An architecturall s:	difficulty) because of major operati Ity) because of excessive costs of add y or a historically significant part of the	onal problems in the use of the ditional or altered construction elements e building or structure.
The additional area is needed on the mezzanine level to complete construction for new resident supervisor apartment units and reconfiguration of the space otherwise. The small bump-out addition will accommodate a new curtain wall feature to dross up the artistic of the level.			
new curtain wall feature to dress up the	exterior of the	ouilding.	dition will accommodate a
10. STATEMENT OF ACCURACY			
hereby certify under penalty of perjury that the information contained in this application is accurate			
Signature of applicant or person submitting application	Please print name		Date of signature (month, day, year)
	Edwin L. Rens	ink	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Signature of design professional (if applicable)	Please print name		Date of signature (month, day, year)
	William A. Bro	wne, Jr., FAIA	(' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
11. STATEMENT OF AWARENESS (If the applicati	on is submitted on	the applicant's behalf, the applicant	must sign the following statement
nereby certify under penalty of perjury that I am a	ware of this reques	for variance and that this applicat	ion is being submitted on my bobals
Signature of applicant	Please print name	шт друпом	Date of signature (month, day, year)
	Bryan Duncan.	P.E.	- (



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Attach additional pages as needed to complete this application.

Variance number (Assigned by department)

15-01-18 (c)

	15 ~ 6	31- (8 66)		
1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; ι	sually this is the owner)			
Name of the applicant	Title			
Bryan Duncan, P.E.	Director of Capita	l Planning		
Name of organization	Telephone number			
Indiana State University	(812) 237-8195			
Address (number and street, city, state, and Zip code)				
951 Sycamore Street Terre Haute, Indiana 47809				
2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (if not submitted by	the applicant)			
Name of person on behalf of the applicant	Title			
Edwin L. Rensink	Principal			
Name of organization	Telephone number			
RTM Consultants, Inc.	(317) 329-7700			
Address (number and street, city, state, and Zip code)				
6640 Parkdale Place, Suite J., Indianapolis, Indiana 46254				
3. DESIGN PROFESSIONAL OF RECORD (If applicable)				
Name of design professional	License number			
William A. Browne, Jr., FAIA	4154			
Name of organization	Telephone number			
Ratio Architects	(317) 633-4040			
Address (number and street, city, state, and Zip code)				
107 South Pennsylvania Street Indianapolis, Indiana 46204				
4. PROJECT IDENTIFICATION				
Name of project	State project number	County		
Indiana State University Blumberg Hall		Vigo County		
Site Address (number and street, city, state, and Zip code)				
400 Mulberry Street Terre Haute, Indiana 47809		_		
Type of project: New ■ Addition ■ Alteration □ Chan	ge of Occupancy	☐ Existing		
5. REQUIRED ADDITIONAL INFORMATION				
The following required information has been included with this application (check as application)	eable):			
A check made payable to the Indiana Department of Homeland Security for the appropriate amo	unt (see instructions)			
One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives.				
Written documentation showing that the local fire official has received a copy of the variance application.				
Written documentation showing that the local building official has received a copy of the variance				
Trincol desarrolliation showing that the local ballong shicial has received a copy of the variance	application.			
6. VIOLATION INFORMATION				
Has the Plan Review Section of the Division of Fire & Building Safety issued a Correction Order?				
☐ Yes (if yes, attach a copy of the Correction Order) ■ No				
Has a violation been issued? Yes (if yes, attach a copy of the Violation and answer the following) I No			
	•			
_	rcement Section			
☐ Local Fire Department				

7. DESCRIPTION OF REQUESTED VARIANCE			
Name of code or standard and edition involved		Specific code section	
2014 Indiana Building Code		708.6, 716	
Nature of non-compliance (include a description of spaces, e	quipment, etc. involve	d as necessary)	
New student lounges on each of the residuindows and doors. Additionally, the dononrated frosted glazing. Code requires classification. Blumberg Hall is one (1) of four (4) residuate University campus in Terre Haute. including student room and rest room resystems, electrical system upgrades, and	ors and sidelig protected oper ence towers ma The project p novations, com	hts into the new bathing room lings to the corridor based up aking up the 1960's-era Sycan roposes a renovation/rehabilit mon use area renovations, ne	ns on each floor will have on the R-2 Occupancy nore Towers at the Indiana tation to the structure, w mechanical and plumbing
8. DEMONSTRATION THAT PUBLIC HEALTH, SAI	FETY, AND WELFA	ARE WILL BE PROTECTED	
Select one of the following statements:			
■ Non-compliance with the rule will not be adverse	to the public health	, safety or welfare; or	
☐ Applicant will undertake alternative actions in	lieu of complianc	e with the rule to ensure that grantin	g of the variance will not be adverse
to public health, safety, or welfare. Explain w Facts demonstrating that the above selected statement is true	ny aiternative acti e:	ons would be adequate (be specific)	•
 The building will be protected through The glass openings and doors will be of close-spaced sprinklers. The water per lineal foot along the glass wall. An identical variance for the student - 14-1-37(d). Identical variances for including 12-11-22(e) for Johnson Hamman and the student including 12-11-22(e). 	protected with r curtain will h lounges was gi student lounge all at Ball State	a a sprinkler water curtain despeted to deliver a minimeranted for ISU Mills Hall, and s have been granted for several University.	signed per NFPA 13, consisting um discharge rate of 3 gpm
9. DEMONSTRATION OF UNDUE HARDSHIP OR	HISTORICALLY SI	GNIFICANT STRUCTURE	
Select one of the following statements:			
☐ Imposition of the rule would result in an undue hardsh ■ Imposition of the rule would result in an undue building or structure ☐ Imposition of the rule would result in an undue hard ☐ Imposition of the rule would prevent the preservation	hardship <i>(unusua</i> Iship <i>(unusual diffic</i> on of An architectura	I difficulty) because of major operati	onal problems in the use of the
Facts demonstrating that the above selected statement is true	i:		
In addition to the open lounge areas a are an important feature of the design	addressed in a s	separate variance, the lounges	s with glazing to the corridor
10. STATEMENT OF ACCURACY			
I hereby certify under penalty of perjury that the information	ation contained in th	nis application is accurate	
Signature of applicant or person submitting application	Please print nam		Date of signature (month, day, year)
	Edwin L. Ren	sink	,
Signature of design professional (if applicable)	Please print nam	e	Date of signature (month, day, year)
	William A. Bı	rowne, Jr., FAIA	
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I hereby certify under penalty of perjury that I am a	ware of this reque	est for variance and that this applicat	ion is being submitted on my babals
Signature of applicant	Please print name	e	Date of signature (month, day, year)
	Bryan Dunca	n, P.E.	- ' ', ', ', ', ', ', ', ', ', ', ', ', '



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INSTRUCTION: Please refer to the attached four (4) page instructions.

Attach additional pages as needed to complete this application.

Variance number (Assigned by department)

15-01-18(d)

1. APPLICANT INFORMATION (Person who would be in violation if variance is not gi	ranted; usually this is the owner	7)	
Name of the applicant	Title		
Bryan Duncan, P.E.	Director of Capita	l Planning	
Name of organization	Telephone number	·	
Indiana State University			
Address (number and street, city, state, and Zip code)			
951 Sycamore Street Terre Haute, Indiana 47809			
2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (if not subm			
Name of person on behalf of the applicant	Title		
Edwin L. Rensink Name of organization	Principal Telephone number		
	1 '		
RTM Consultants, Inc. Address (number and street, city, state, and Zip code)	(317) 329-7700		
6640 Parkdale Place, Suite J., Indianapolis, Indiana 46254			
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Name of design professional	License number		
William A. Browne, Jr., FAIA Name of organization	4154		
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4. PROJECT IDENTIFICATION			
Name of project	State project number	County	
Name of project Indiana State University Blumberg Hall	State project number	County Vigo County	
Name of project Indiana State University Blumberg Hall Site Address (number and street, city, state, and Zip code)	State project number	1 1	
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7 DESCRIPTION OF REQUESTED VARIANCE		
7. DESCRIPTION OF REQUESTED VARIANCE Name of code or standard and edition involved	Specific code section	
2014 Indiana Building Code	1018.1	!
Nature of non-compliance (include a description of spaces, ea	quipment, etc. involved as necessary)	
New student lounges on each of the reside corridor for rooms other than "foyers, lo Blumberg Hall is one (1) of four (4) reside State University campus in Terre Haute. Including student room and rest room rest systems, electrical system upgrades, and it	bbies, and reception rooms". ence towers making up the 1960's-era The project proposes a renovation/re novations, common use area renovati	a Sycamore Towers at the Indiana ehabilitation to the structure, ons, new mechanical and plumbing
8. DEMONSTRATION THAT PUBLIC HEALTH, SAF	FETY, AND WELFARE WILL BE PROTECTED	
Select one of the following statements:		
■ Non-compliance with the rule will not be adverse	to the public health, safety or welfare; or	
☐ Applicant will undertake alternative actions in to public health, safety, or welfare. Explain w	hy alternative actions would be adequate (be	at granting of the variance will not be adverse specific).
Facts demonstrating that the above selected statement is true	e:	
project.	r high rise buildings will be provided	throughout the building as part of this
The proposed design will comply with follows: Spaces are permitted to be o rooms, the building is protected throuse required exits.	pen to the corridor provided that the	y Code for residential occupancies, as spaces are not used for sleeping the space does not obstruct access to
An identical variance was granted for variances have been granted for stud 09-35b), Ball State University (12-11-	lent housing projects at Rose-Hulman	camore Towers - 14-1-37(c). Identical (11-07-50a), Indiana University (08-sat Purdue University.
variances have been granted for stud	ent housing projects at Rose-Hulman -22g), as well as a number of facilities	n (11-07-50a), Indiana University (08-
variances have been granted for stud 09-35b), Ball State University (12-11-	ent housing projects at Rose-Hulman -22g), as well as a number of facilities	n (11-07-50a), Indiana University (08-
variances have been granted for stud 09-35b), Ball State University (12-11- 9. DEMONSTRATION OF UNDUE HARDSHIP OR Select one of the following statements:	ent housing projects at Rose-Hulman 22g), as well as a number of facilities HISTORICALLY SIGNIFICANT STRUCTURE	a (11-07-50a), Indiana University (08- s at Purdue University.
variances have been granted for stud 09-35b), Ball State University (12-11- 9. DEMONSTRATION OF UNDUE HARDSHIP OR Select one of the following statements: Imposition of the rule would result in an undue hardship Imposition of the rule would result in an undue in the rule would result in the rule would result in an undue in the rule would result in the rule would result in an undue in the rule would result in the rule wou	ent housing projects at Rose-Hulman 222g), as well as a number of facilities HISTORICALLY SIGNIFICANT STRUCTURE ip (unusual difficulty) because of physical limitations	a (11-07-50a), Indiana University (08- s at Purdue University.
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INDIANA DEPARTMENT OF HOMELAND SECURITY

CODE SERVICE SECTION
402 West Washington Street, Room W246
Indianapolis, IN 46204-2739
http://www.in.gov/dhs/fire/fp_bs_comm_code/



INSTRUCTION: Please refer to the attached four (4) page instructions. Attach additional pages as needed to complete this application.

Variance number (Assigned by department)

15-01-18(8)

	13-6	515 (8 6 5)	
1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted;	isually this is the owner,		
Name of the applicant	Title		
Bryan Duncan, P.E.	Director of Capita	l Planning	
Name of organization	Telephone number		
Indiana State University	(812) 237-8195		
Address (number and street, city, state, and Zip code)			
951 Sycamore Street Terre Haute, Indiana 47809			
2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (if not submitted by			
Name of person on behalf of the applicant	Title		
Edwin L. Rensink Name of organization	Principal Telephone number		
· ·	'		
RTM Consultants, Inc. Address (number and street, city, state, and Zip code)	(317) 329-7700		
6640 Parkdale Place, Suite J., Indianapolis, Indiana 46254			
<u> </u>			
DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional	License number		
William A. Browne, Jr., FAIA	4154	•	
Name of organization	Telephone number		
Ratio Architects	(317) 633-4040		
Address (number and street, city, state, and Zip code)	(317) 033-4040	·	
107 South Pennsylvania Street Indianapolis, Indiana 46204			
\			
4. PROJECT IDENTIFICATION			
4. PROJECT IDENTIFICATION Name of project	State project number	County	
Name of project	State project number	County Vigo County	
	State project number	County Vigo County	
Name of project Indiana State University Blumberg Hall	State project number	1	
Name of project Indiana State University Blumberg Hall Site Address (number and street, city, state, and Zip code) 400 Mulberry Street Terre Haute, Indiana 47809	State project number	1	
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7. DESCRIPTION OF REQUESTED VARIANCE		
Name of code or standard and edition involved	Specif	ic code section
2014 Indiana Building Code	716.	
Nature of non-compliance (include a description of spaces, eq	uipment, etc. involved as nece	essary)
be either self- or automatic-closing, based existing where the door leaf will be a repl Blumberg Hall is one (1) of four (4) reside State University campus in Terre Haute.	upon the 20-minute acement-of-like-kine ence towers making The project propose tovations, common	up the 1960's-era Sycamore Towers at the Indiana es a renovation/rehabilitation to the structure, use area renovations, new mechanical and plumbing
8. DEMONSTRATION THAT PUBLIC HEALTH, SAF	ETY, AND WELFARE WI	LL BE PROTECTED
Select one of the following statements:		
■ Non-compliance with the rule will not be adverse t	o the public health, safety	or welfare: or
☐ Applicant will undertake alternative actions in	lieu of compliance with	the rule to ensure that granting of the variance will not be adverse
to public health, safety, or welfare. Explain wh Facts demonstrating that the above selected statement is true	ly alternative actions wo	uld be adequate (be specific).
<u> </u>	•	
1. The building will be protected throug	hout with a sprinkle	er system per NFPA 13 as part of this project.
The corridors will be provided with a	smoke detection sy	stem connected to the building fire alarm system -
corridor smoke detectors are not requ	uired by code. Each	sleeping room will be provided with single-station
smoke detectors, as required. 3. An identical variance was granted for	. TOTI MOULTE II	4
variances were granted for several pr	' 15U MIIIS Hall, and evious dormitory fo	other wing of Sycamore Towers - 14-1-37(e). Identical acilities under the following variance approvals: [98-4-
9], [00-2-23], [00-5-9], [06-11-47(a)], [0	07-07-26(a)]. [10-1-3	87(b)], [11-3-17(a)], and ISU Erickson Hall [12-05-
36(c)].	(-)1)[(-)], [o 1. (a)], and 1. o Differsion Han [12-05-
9. DEMONSTRATION OF UNDUE HARDSHIP OR I	HISTORICALLY SIGNIFIC	ANT STRUCTURE
Select one of the following statements:		
$\hfill\square$ Imposition of the rule would result in an undue hardship	o (unusual difficulty) becaus	se of physical limitations of the construction site or its utility services
■ Imposition of the rule would result in an undue houlding or structure	ardship <i>(unusual diffici</i>	ulty) because of major operational problems in the use of the
	ship <i>(unusual difficultv</i>) be	ecause of excessive costs of additional or altered construction elements
☐ Imposition of the rule would prevent the preservation	of An architecturally or a	historically significant part of the building or structure.
Facts demonstrating that the above selected statement is true:		
701 1 111 1 1		
assentially incorrective in a ghost posi-	aintaining door clos	ers or door hold-open devices that are rendered
essentially inoperative in a short perio	od of time in the stu-	gent environment.
10. STATEMENT OF ACCURACY		
I hereby certify under penalty of perjury that the informa	ition contained in this appl	ication is accurate
Signature of applicant or person submitting application	Please print name	Date of signature (month, day, year)
	Edwin L. Rensink	,
Signature of design professional (if applicable)	Please print name	Date of signature (month, day, year)
	William A. Browne	
11 STATEMENT OF AWARENESS (154)		
		oplicant's behalf, the applicant must sign the following statement)
I hereby certify under penalty of perjury that I am as Signature of applicant		variance and that this application is being submitted on my behalf.
	Please print name	Date of signature (month, day, year)

Bryan Duncan, P.E.



☐ Local Fire Department

INDIANA DEPARTMENT OF HOMELAND SECURITY CODE SERVICE SECTION

402 West Washington Street, Room W246 Indianapolis, IN 46204-2739 http://www.in.gov/dhs/fire/fp_bs_comm_code/



Variance number (Assigned by department) INSTRUCTION: Please refer to the attached four (4) page instructions. Attach additional pages as needed to complete this application. 15-01-18(F) 1. APPLICANT INFORMATION (Person who would be in violation if variance is not granted; usually this is the owner) Name of the applicant Brvan Duncan, P.E. Director of Capital Planning Name of organization Telephone number **Indiana State University** (812) 237-8195 Address (number and street, city, state, and Zip code) 951 Sycamore Street Terre Haute, Indiana 47809 2. PERSON SUBMITTING APPLICATION ON BEHALF OF THE APPLICANT (if not submitted by the applicant) Name of person on behalf of the applicant Edwin L. Rensink **Principal** Name of organization Telephone number (317) 329-7700 RTM Consultants, Inc. Address (number and street, city, state, and Zip code) 6640 Parkdale Place, Suite J., Indianapolis, Indiana 46254 3. DESIGN PROFESSIONAL OF RECORD (If applicable) Name of design professional License number 4154 William A. Browne, Jr., FAIA Telephone number Name of organization **Ratio Architects** (317) 633-4040 Address (number and street, city, state, and Zip code) 107 South Pennsylvania Street Indianapolis, Indiana 46204 4. PROJECT IDENTIFICATION Name of project State project number County **Indiana State University Blumberg Hall** Vigo County Site Address (number and street, city, state, and Zip code) 400 Mulberry Street Terre Haute, Indiana 47809 Type of project: Addition Alteration ☐ Change of Occupancy ☐ Existing New 5. REQUIRED ADDITIONAL INFORMATION The following required information has been included with this application (check as applicable): A check made payable to the Indiana Department of Homeland Security for the appropriate amount. (see instructions) One (1) set of plans or drawings and supporting data that describe the area affected by the requested variance and any proposed alternatives. Written documentation showing that the local fire official has received a copy of the variance application. Written documentation showing that the local building official has received a copy of the variance application. 6. VIOLATION INFORMATION Has the Plan Review Section of the Division of Fire & Building Safety issued a Correction Order? ☐ Yes (if yes, attach a copy of the Correction Order) Has a violation been issued? Yes (if yes, attach a copy of the Violation and answer the following) ■ No

☐ State Fire and Building Code Enforcement Section

7. DESCRIPTION OF REQUESTED VARIANCE				
Name of code or standard and edition involved	Specific code section			
2014 Indiana Building Code Nature of non-compliance (include a description of spaces, eq.	1008.1.9.11, exc. 6			
The west stair will be provided with door		ide apposite the egress side to provent		
re-entry onto each floor from the stair in a				
for stairways "serving not more than 7 sto				
the partial 2^{nd} floor "mezzanine"). The be	uilding is classified as a high rise pe	er current code, but does not have all of		
the features enumerated in the separate p	rovision in Sec. 403.5.3 for locking (doors in a high rise because of not		
having a fire command center where door	s can be unlocked manually.	<u> </u>		
Blumberg Hall is one (1) of four (4) reside				
State University campus in Terre Haute.				
including student room and rest room ren				
systems, electrical system upgrades, and in		V 1		
8. DEMONSTRATION THAT PUBLIC HEALTH, SAF	ETY, AND WELFARE WILL BE PROTECTED			
Select one of the following statements:				
■ Non-compliance with the rule will not be adverse t				
☐ Applicant will undertake alternative actions in	lieu of compliance with the rule to ensure the	nat granting of the variance will not be adverse		
to public health, safety, or welfare. Explain wh Facts demonstrating that the above selected statement is true:		э ѕреспіс).		
1. All exit doors will be openable in the o	lirection of egress at all times.			
2. The devices in question will unlock upon actuation of the fire alarm system or sprinkler system, or upon loss of				
power controlling the devices.		· -		
3. The building will be protected throug				
Additionally, an automatic standpipe				
4. A voice-alarm system as required for	high rise buildings will be provided	throughout the building as part of this		
project. Egress lighting and exit signa 5. Two (2) separate standby power gene	ige will be appared throughout the	fire pump, and one to serve elevators,		
emergency lighting, the fire alarm sys	tem, and the existing stair pressuri	zation system		
6. An identical variance was granted for	ISU Mills Hall, another wing of Sy	camore Towers - 14-05-17 A nearly		
identical variance was granted for the	12-story IU Briscoe Hall Renovation	on in 2010 - Variance 10-01-37c.		
-				
9. DEMONSTRATION OF UNDUE HARDSHIP OR H	IISTORICALLY SIGNIFICANT STRUCTURE			
Select one of the following statements:				
☐ Imposition of the rule would result in an undue hardship	(unusual difficulty) because of physical limitation	ns of the construction site or its utility services		
■ Imposition of the rule would result in an undue hardship (unusual difficulty) because of major operational problems in the use of the				
building or structure				
☐ Imposition of the rule would result in an undue hardship (unusual difficulty) because of excessive costs of additional or altered construction elements ☐ Imposition of the rule would prevent the preservation of An architecturally or a historically significant part of the building or structure.				
Facts demonstrating that the above selected statement is true:				
The devices are needed to enhance perso	nal safety for the student residents,	and to prevent intruders onto the		
individual residential floors from within stairs.				
10. STATEMENT OF ACCURACY				
I hereby certify under penalty of perjury that the information contained in this application is accurate				
Signature of applicant or person submitting application	Please print name	Date of signature (month, day, year)		
	Edwin L. Rensink			
Signature of design professional (if applicable)	Please print name	Date of signature (month, day, year)		
	William A. Browne, Jr., FAIA	2. e.ga.a.e (monar, aay, year)		
11. STATEMENT OF AWARENESS (If the application				
I hereby certify under penalty of perjury that I am at Signature of applicant				
Oignature of applicant	Please print name	Date of signature (month, day, year)		

Bryan Duncan, P.E.

Date of signature (month, day, year)







